



Attorney Docket No. 051319/0047

IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Taiichi Miya et al. Examiner: Thiem D. Phan
Application No.: 10/607,594 Confirmation No.: 5978
Filed: June 27, 2003 Group Art Unit: 3729
For: SLACK-FORMING MECHANISM FOR STATOR COIL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith is a Reply to Office Action dated September 9, 2005 for the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

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The additional fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total Claims	4	- 20*	= 0	x \$50.00	= \$0.00
Independent Claims	2	- 3**	= 0	x \$200.00	= \$0.00
First Presentation of a Multiple Dependent Claim				+ \$360.00	= \$0.00

* If less than 20, insert 20.

** If less than 3, insert 3.

TOTAL = \$0.00

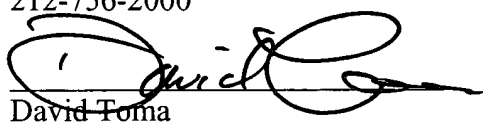
- ☐ A check in the amount of \$XXX in payment of the fee for additional claims is transmitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 50-0675, Order No. 051319.0047. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please Charge \$XXX to Deposit Account No. 50-0675 in payment of the fee for additional claims. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- ☐ The following extension fee is applicable to the Response filed herewith: \$XXX extension fee for response within one month pursuant to 37 C.F.R. § 1.136(a).
- ☐ A check in the amount of \$XXX in payment of the extension fee is transmitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any additional extension fee required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 50-0675, Order No. 051319.0047. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge \$XXX extension fee to Deposit Account No. 50-0675. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,

Schulte Roth & Zabel LLP
919 Third Avenue
New York, NY 10022
212-756-2000

By: 
David Toma
Agent for the Applicants
Reg. No. 57,380

Dated: October 7, 2005
New York, New York

Enclosure
DT/ja

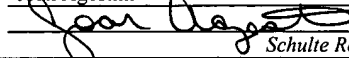
CERTIFICATE OF MAILING

Date of Deposit: October 7, 2005

I hereby certify under 37 C.F.R. 1.8 that this correspondence and enumerated documents are being deposited with the United States Postal Service as First Class Mail with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name:
Signature:

Jean Agostini


Schulte Roth & Zabel, LLP



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RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In reply to the Office Action dated September 9, 2005, Applicants hereby provide the following in connection with the above-identified patent application:

REMARKS begin on page 2 of this paper.